

I-AWE-N

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL

United in Freedom

 Check if name is changed

RECEIVED

FEDERAL ELECTRIC
COMMISSION MAIL ROOM

2. DATE

5/27/99

(b) Number and Street Address

P.O Box 3365

 Check if address is changed

(c) City, State and ZIP Code

Saratoga Springs NY 12866

JUN 1 11 17 AM '99 THIS STATEMENT AN AMENDMENT?

3. REIDENTIFICATION NUMBER
C00345033 YES NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party
(National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
(6) None		

Type of Connected Organization

 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Patricia Raucci

Mailing Address

20 Mitchell St
Saratoga Springs NY

Title or Position

Custodian

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

John L. Pritchard

Mailing Address

25 Amity St
Clifton Park NY 12065

Title or Position

Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Saratoga National Bank

Mailing Address and ZIP Code

137 So Broadway
Saratoga Springs NY 12866

I certify that I have examined this Statement and to the best of my knowledge and belief this is a correct and complete.

TYPE OR PRINT NAME OF TREASURER

John L. Pritchard

SIGNATURE OF TREASURER

DATE

5/27/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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